## STUDENT REPRESENTATION FEE (FUND 46) DASB FINANCE COMMITTEE AGENDA ITEM

This form must be submitted to Student Accounts NO LATER than 4:30 PM on the Tuesday (subject to change) before the meeting in which you wish the item to appear. It MUST be filled out completely (all pages), or your request may be postponed or denied. Attach additional sheets if necessary.

Clubs should fill out the "ICC/Club Budget Request" form for all requests.

NOTE: The Finance Committee does not meet during the first week of the quarter, dead and finals weeks or breaks.

Please submit the original and one (1) cop			(s) for a total of two (2) sets.	
Name: Shaila Ramos-Garcia	_ Signature	e & Date:	4/20/23	
Phone: (408) 564-2752	_ E-mail: _	ramosshaila@fhd	a.edu	
Group or department you are representing: Equivous are required to attend the DASB Finance Committee in items 1 and 2 below and possibly item 3 as well if determine Request to be on the Finance Committee Agenda	neeting, Monday ( ned by the Chair (	at 3:30 PM (subject to che of Finance.	unge), to answer any questions for	
1. GENERAL ITEM (Includes Budget Trans Summary of item: (REQUIRED, use additional		sary)		
2. NEW OR ADDITIONAL FUNDING: Total Complete the next two pages as well when requesting new additional details and event/program descriptions. Incomp	or additional fund	ding. Atta <mark>ch additional sh</mark>	neets if necessary. Also attach	
3.	R (Only Page 1 Req	uired; must attend Finance	Committee meeting only if contacted):	
Account Name:				
Account Number:				
From Object Code: To Object Code:	Req	uested Amount \$	DASB Use only Approved Amount \$	
Reason for Transfer: (REQUIRED, use additional sheets if necessary)				
The Budgeter and Administrator cannot be the same person.				
Budgeter's Name (PRINT)  Budgeter's Sign	nature	Phone Number	E-mail	
Administrator's Name (PRINT) Administrators	Signature	Phone Number	E-mail	
`	Action Take			
Transfer Approved and Forwarded to Student Accounts on Date				
DASB Chair of Finance	Date I	DASB Advisor		

The DASB Finance Code and the DASB Budget Stipulations must be adhered to at all times. They are available at <a href="http://www.deanza.edu/dasb/budget/">http://www.deanza.edu/dasb/budget/</a>

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## Student Representation Fee (Fund 46) Funding Criteria

Check off all of the criteria you feel this request meets and attach all supporting documents including conference programs/schedules, event/workshop descriptions, etc.

Also submit a typed statement explaining why you feel this request meets the criteria for Student Representation Fee funds.

Your request will be reviewed by the DASB Finance Committee, DASB Senate, Dean of Student Development, and Vice President of Student Services to determine eligibility for funding from the Student Representation Fee funds.

	Carrying out voter registration, education and mobilization campaigns
	Training students and hiring student interns to organize and advocate for themselves and their communities before state and local decision-making bodies
	Carrying out educational programs for the student body to help students become better informed of important decisions being made at the state and local level affecting their lives as students
	Supporting student advocates to meet with members of the state legislature and other elected officials in Sacramento and/or at the regional or local level
☑	Supporting student advocates to organize with other students at the local, regional and statewide level at conferences, training sessions and advocacy gatherings
	Increasing the capacity of the student body to organize and mobilize and develop leadership to be more effective advocates for themselves and their communities before state and local decision-making bodies

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#### NEW OR ADDITIONAL STUDENT REPRESENTATION FEE (FUND 46) FUNDING REQUESTS

1. Program (Account) Name: Higher Education for AB 540 Students	
2. Have you previously received DASB funding for this program	?
No ☐ Yes ☑ DASB Account Number: 41-56410	Year Funded: 2022-2023
3. If yes, amount previously requested for current account	\$ 27,129.23
4. If yes, total amount previously allocated current account	\$ 22,545
5. How long has this program existed? 11 years	
6. Number of students directly served or involved in this program	n: <sup>582</sup>
Please ACCURATELY and THOROUGHLY complete numbers 7. List ALL other accounts and/or sources of income (list ALL Account Numbers 1. Purposes/Restrictions) also list ALL Co-Sponsorships for the Program; include and amounts will be verified. Failure to disclose ANY and ALL non-I disqualification of your request and/or the freezing of your DASB Account is B Budget Accounts:	mbers, Account Names, Account Balances and Account anticipated future sources and co-sponsorships. Accounts DASB Funding Sources will result in the immediate f already approved.
Trust Accounts:	
Fund 15 Accounts: HEFAS: 20,000 UndocuSTEM:41,000, Total	: 61 000
Grant Funded Accounts:	. 01,000
Other District Accounts:	
Off-Campus/Off-District Accounts:	
On-Campus Co-Sponsorships:	_
Off-Campus Co-Sponsorships:	
8. Give a brief description of the program/services to be provided How will these funds benefit present and future students? This ann (Immigrant Youth Empowerment Conference) is a statewide network of educators students in higher education. Studens will learn best practices, resources and network of educations.	ual conference that happens in UCLA titled IYEC and students working on accessability for undocumented
9. How do you use other funding to support your program? Other services, scholarships and office supplies. Some of our big programming items are UndocuWelcome Orientation.	funding is used for programming, technical and professional
Ondocuvercome Orientation.	
10. What would be the impact if DASB did not completely fund the and student representation so if we do not receive the funds we might not be able to	
11. How have you been meeting or how do you plan to meet the benefiting from DASB funds allocated to you have paid the \$10 (DASB Budget Stipulation # 1)?  All students attending are enrolled this \$\frac{1}{2} \text{DASB Student ID.}	
12. Total amount being requested	<u>\$</u> 2565.00

(You must also complete the object code information on the next page)

#### Signatures that are needed for requesting funds

All financial documents, forms, requests/requisitions require the signature of the budgeter(s) and the administrator responsible for the program of the account. The budgeter and administrator responsible for the program of the account shall sign designating this is an appropriate expenditure of DASB funds and in the best interest of the student body. Administrators are responsible for any expenditures exceeding budget allocations. The Budgeter and Administrator cannot be the same person.

> The DASB Finance Code and the DASB Budget Stipulations must be adhered to at all times. They are available at http://www.deanza.edu/dasb/budget/

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### DASB Student Representation Fee (Fund 46) Object Code/Line Item Information

\* Fill out only applicable object codes. \*

Object Code Name and Number	Description of Expenses (Please itemize all your expenses, BE SPECIFIC)	Requested Amount (round up to the next whole dollar)	DASB Use Only Approved Amount
Student Payroll – 2310 Include hours to be worked x pay rate MUST ALSO COMPLETE BENEFITS – 3200			
Benefits – 3200 (1.52 % for Student Employees) MUST BE COMPLETED WHEN REQUESTING PAYROLL			
Supplies – 4010 (Office supplies or as specified in request or stipulations)			
Banners – 4013 (Reusable banners that will last multiple years)			
Food/Refreshments — 4015 (Must adhere to district Administrative Procedure 6331, http://www.boarddocs.com/ca/fhda/Board.nsf/goto?open &id=AKVUKX7C7F98)	7 Students, two evenings for dinner at \$25 each	\$350.00	
Printing – 4060 (flyers, posters, programs, forms, etc.)			
Technical & Professional Services – 5214 (Consultants/Guest Speakers/Entertainment) maximum \$1,200 per speaker per event maximum \$1,800 per performance			
Domestic Conference and Travel – 5510	Hotel Rooms for 7 students and gas travel from De Anza College to UCLA.	\$2215.33	
	Grand Total	\$2565.33	

No deficit spending will be allowed and all accounts shall be held to line item amounts. Funds allocated to a program must be used for the purpose stated in the original request and stay with that program and cannot be used for or allocated/donated to other programs without DASB Senate approval.

#### A budgeter's and an administrator's signature are required before this form will be considered.

The Budgeter and Administrator cannot be the same person.

Angelica Esquivel	(Jan	408-864-8993	esquivelangelica@fhda.edu
Budgeter's Name (PRINT)	Budgeter's Signature	Phone Number	E-mail
Budgeter's Name (PRINT)	Budgeter's Signature	Phone Number	E-mail
Alicia Cortez	Alicia Cortez	408-864-8365	cortezalicia@fhda.edu
Administrator's Name (PRIN	T) Administrators Signature	Phone Number	E-mail

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Today This weekend Music Business Food & Drink Health Hobbies



May 6



# 15th Annual Immigrant Youth Empowerment Conference

You're invited to our quinceañera! Join us for our 15th annual Immigrant Youth Empowerment Conference at UCLA on May 6th. RSVP now:)

Bv The	AB540	Proi	ect
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15 followers

Follow

Free (i)



Reserve a spot

## Agenda

## Check-In/Registration



AB540 Team

10:00 AM - 10:30 || Check in and refreshments

10:30 AM - 11:00 AM

**Opening Words & Introduction** 



AB540 Team

10:30 AM - 10:45 AM ||

10:45 AM

Workshop 1 Breakout

10:45 AM - 11:30 AM ||

11:45 AM

Workshop 2 Breakout

11:45 AM - 12:30 PM

## Workshop 3 Breakout

1:30 PM - 2:15 PM ||

## **Closing Speaker**

2:30 PM - 3:00 PM ||

## **Closing Words**



The AB540 Team

3:00 PM - 3:15 PM ||

## **Networking & Departure**



The AB540 Team

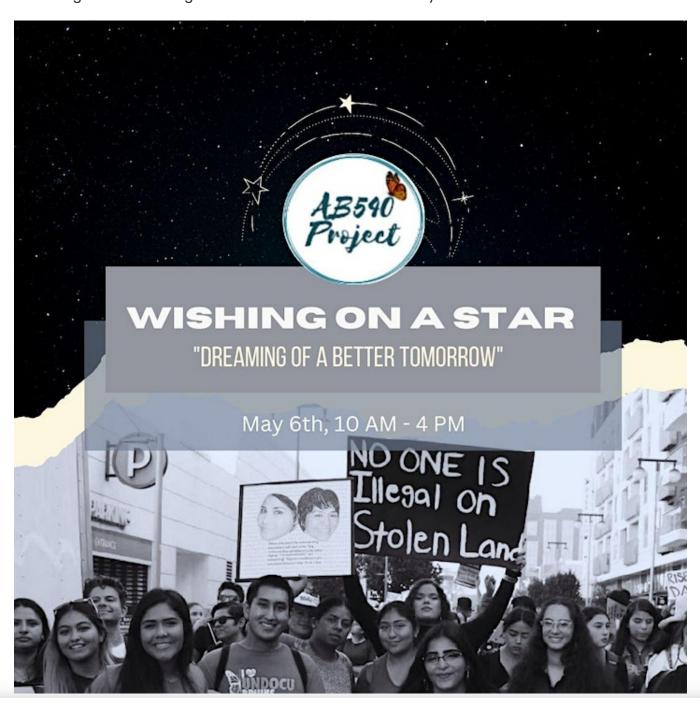
3:15 PM - 3:45 PM || Take the time to connect with vendors, speakers, and other participants at the conference

Collapse agenda

## **About this event**

experiences of undocumented students & community leaders

The conference is open to everyone regardless of legal status but is specifically geared towards informing and advocating for our undocumented community members and allies





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One Key™ is arriving in mid-2023. You'll earn rewards at the new One Key rate on trips after launch, plus you'll unlock new and exciting member benefits. Learn more about One Key here: expedia.com/one-key.

## **Secure booking**

#### Fully refundable before Thu, May 4, 4:00pm (property local time)

You can change or cancel this stay if plans change. Because flexibility matters.



Sign in or create an account to earn 1,684 Expedia Rewards points after this trip ➤

## Who's checking in?

Room 1: 3 Adults, 1 Queen Bed, Non-smoking

✓ Free WiFi

First name \*

(e.g. John)

Last name \*

(e.g. Smith)

Mobile phone number \*

USA +1

So the property can reach you

Receive text alerts about this trip. Message and data rates may apply.

Special Requests (optional) \*

Room 2: 3 Adults, 1 Queen Bed, Non-smoking

✓ Free WiFi

First name

(e.g. John)

Last name

Ramada Plaza by Wyndham West Hollywood Hotel & Suites

7/10 Good (1,007 reviews)

Guests rated this property 7.2/10 for cleanliness

**3 Rooms:** Room, 2 Double Beds, Non Smoking

Check-in: Fri, May 5 Check-out: Sun, May 7 2-night stay

#### **Price details**

3 rooms x 2 nights \$1,684.00 \$280.67 average per night per room

Taxes \$264.30

(e.g. Smith)

Special Requests (optional) >

Room 3: 1 Adult, 1 Queen Bed, Non-smoking

✓ Free WiFi

First name

(e.g. John)

Last name

(e.g. Smith)

Special Requests (optional) \*

Hotel Booking Protection

\$112.03

Total \$2,060.33

Pay now \$112.03

Pay at property \$1,948.30

#### Not included in your total

Mandatory charge: Collected at property. Details

## Protect your stay Recommended

**Important:** Trip cancellation due to government travel advisories, fear of travel, or change of mind is not covered. COVID-19 is a foreseen event and certain other coverages will not apply. **Learn more** 

#### Why should you protect your trip?

#### ✓ COVID-19 reimbursement up to 100%

If you're diagnosed with COVID-19 and need to cancel, shorten, or delay your stay

#### ✓ Trip cancellation up to \$3,000 and interruption up to \$3,750

If you cancel or shorten your trip due to an illness, adverse weather, or other covered events

#### ✓ Medical expenses up to \$50,000

If you fall sick or get injured during your stay and require a treatment or need emergency evacuation

#### ✓ Trip inconvenience up to \$500

If the property is misinterpreted in advertisement shown while booking or you're denied entry. This coverage may vary for residents of NY, WA, CA, PA

#### ✓ Trip delay up to \$500

If you arrive or depart late due to quarantine, adverse weather, or other

View insurance details and disclosures			
Select an option to continue your booking *			
·	6.00 person		
○ No thanks			
Payment method			
◆ \$0.00 due now for your hotel. Your card will only be charged for Booking Protection today.	Hotel		
Discretchib Discre			
Name on Card*			
Debit/Credit card number *			
Expiration date *			
Month			
Security code *			

## Manage your booking

#### **Confirmation email**

Please enter the email address where you would like to receive your confirmation.

Email address \*

## Important information

- Cancellations or changes made after 4:00pm (property local time) on May 4, 2023 or no-shows are subject to a property fee equal to the first nights rate plus taxes and fees.
- · Front desk staff will greet guests on arrival.
- You'll be asked to pay the following charges at the property:
  - Deposit: USD 300 per accommodation, per stay

By clicking on the button below, I acknowledge that I have reviewed the Privacy Statement **4** and Government Travel Advice **4** and have reviewed and accept the Rules & Restrictions **4** and Terms of Use **4**.

 Change of plans? No problem. You can cancel for a full refund before Thu, May 4

#### Complete Booking >

We use secure transmission and encrypted storage to protect your personal information.

This payment will be processed in the U.S. This does not apply when the travel provider (airline/hotel/rail, etc.) processes your payment.

Privacy Policy <a>P</a> Terms of Use <a>P</a>

Accessibility <a>Privacy Choices</a>

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expedia group\*



home / other / fuel cost calculator

## **Fuel Cost Calculator**

This calculator can estimate fuel cost according to the distance of a trip, the fuel efficiency of the car, and the price of gas using various units.

Result

# This trip will require **14.9** gallons of gas, which amounts to a fuel cost of **\$76.63**.

If 5 mpg, it will use 74.4 gallons of gas with cost of \$383.16

If 10 mpg, it will use 37.2 gallons of gas with cost of \$191.58

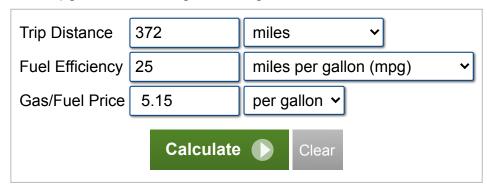
If 20 mpg, it will use 18.6 gallons of gas with cost of \$95.79

If 30 mpg, it will use 12.4 gallons of gas with cost of \$63.86

If 40 mpg, it will use 9.3 gallons of gas with cost of \$47.9

If 50 mpg, it will use 7.4 gallons of gas with cost of \$38.32

If 60 mpg, it will use 6.2 gallons of gas with cost of \$31.93



#### Related

Gas Mileage Calculator | Mileage Calculator

The price of gas may go up or down, but it's always a major expense for most drivers. The average American driver spends about \$3,000 per year on gas, according to the American Automobile Association. Some of the practical ways to reduce fuel costs are listed below.

## Use public transportation

Walking or biking does not consume fuel, and as such does not accumulate fuel cost. In most cases, public transport alternatives to cars such as buses, trains, and trolleys are viable options of reducing fuel costs. Due to the communal nature of ride sharing, the fuel costs of operating public transport are